## CITY OF BRIDGEPORT Request for Marriage Certificate (you are already married)

## PLEASE PRINT CLEARLY

Groom					
First		Middle	Last		
Brides Maiden Name_					
_	First	Middle	Last		
Date of Marriage					
Town of Marriage					
PERSON MAKING RE	QUEST				
Name					
Address					
City/Town		_ State	Zip Code		
Signature: X					
THE LEGAL FEE IS	\$20.00/per	copy (cash) F0	R CERTIFIED COPIES		
Number of Copies	Amount Attached				

IF YOU ARE REQUESTING COPIES BY MAIL, PLEASE MAIL THIS REQUEST ALONG WITH A MONEY ORDER; NO personal checks, credit or debit cards are allowed; MADE PAYABLE TO VITAL RECORDS, c/o 999 Broad Street, Bridgeport, CT 06604.